## 510(k) Summary

JUL 2 2 2014

Proprietary Name:

VariAx Elbow Plating System

Common Name:

Plate, Fixation, Bone

Classification Name and Reference: Single/multiple component metallic bone fixation appliance

and accessories 21 CFR §888.3030

Regulatory Class:

Class II

Product Codes:

HRS: Plate, Fixation, Bone

Sponsor:

Stryker Trauma AG

Contact Person:

Elijah N. Wreh

Regulatory Affairs Specialist

325 Corporate Drive Mahwah, NJ 07430 elijah.wreh@strvker.com Phone: 201-831-5691 Fax: 201-831-4691

Date Prepared:

June 20, 2014

#### Description

This Traditional 510(k) submission is being supplied to the U.S. Food and Drug Administration to provide authorization to market a line extension to the VariAx Elbow Plating System, which was previously cleared in the VariAx Elbow Plating System (K073527 & K101056). The VariAx Elbow Plating System consists of washers, screws, and plates. This submission is intended to introduce 2 & 3-hole plates to the Lateral and Posterior Lateral plate range as well as 3-hole plates to the Posterior Medial, Medial, Medial Extended and the Olecranon plate ranges. All of the plates except for the Olecranon plates are Distal Humerus plates. The subject plates are fixed to the distal humerus and Olecranon using 2.7mm or 3.5mm locking or non-locking screws. These screws were cleared in K073527, K101056, K132502 and K140769. The subject plates are available sterile and non-sterile. The subject and predicate plates are manufactured from Titanium Alloy per ASTM F136 and Commercial Pure Titanium per ASTM F67.

#### Intended Use

The VariAx Elbow Plating System is intended for fracture fixation of long bones.

## Indications for Use

The VariAx Elbow Plating System is intended for fracture fixation of long bones. The distal humerus plates are indicated for:

- intra-articular or extraarticular fractures of the distal humerus
- osteotomies
- nonunions

The olecranon plates are indicated for:

- intra-articular or extraarticular fractures of the proximal ulna
- osteotomies
- nonunions

## Summary of Technology

The device comparison showed that the subject device is substantially equivalent in intended use, design, materials and operational principles to the VariAx Elbow Plating System (K101056) and the Synthes 3.5mm LCP Distal Humerus System (K033995) for fracture fixation of long bones.

## Non-Clinical Testing

Non-clinical laboratory testing was performed on the worst case subject plates to determine substantial equivalence. The following testing was performed:

• "Standard Specification and Test Method for Metallic Bone Plates" as per ASTM F382-99 (reapproved 2008)

Testing demonstrated that the subject plates are substantially equivalent to the currently marketed predicate devices.

# Clinical Testing

Clinical testing was not required for this submission.

#### Conclusion

The subject VariAx Elbow Plating System is substantially equivalent to the predicate devices identified throughout this submission.



Food and Drug Administration 10903 New Hampshire Avenue Document Control Center – WO66-G609 Silver Spring, MD 20993-0002

July 22, 2014

Stryker Trauma AG Mr. Elijah N. Wreh Regulatory Affairs Specialist 325 Corporate Drive Mahwah, New Jersey 07430

Re: K141677

Trade/Device Name: VariAx Elbow Plating System

Regulation Number: 21 CFR 888.3030

Regulation Name: Single/multiple component metallic bone fixation appliance

and accessories

Regulatory Class: Class II Product Code: HRS Dated: June 20, 2014 Received: June 23, 2014

Dear Mr. Wrch:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food. Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration. Please note: CDRH does not evaluate information related to contract liability warranties. We remind you, however, that device labeling must be truthful and not misleading.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the <u>Federal Register</u>.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing

(21 CFR Part 807); labeling (21 CFR Part 801); medical device reporting (reporting of medical device-related adverse events) (21 CFR 803); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please contact the Division of Industry and Consumer Education at its toll-free number (800) 638-2041 or (301) 796-7100 or at its Internet address

http://www.fda.gov/MedicalDevices/ResourcesforYou/Industry/default.htm. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). For questions regarding the reporting of adverse events under the MDR regulation (21 CFR Part 803), please go to

http://www.fda.gov/MedicalDevices/Safety/ReportaProblem/default.htm for the CDRH's Office of Surveillance and Biometrics/Division of Postmarket Surveillance.

You may obtain other general information on your responsibilities under the Act from the Division of Industry and Consumer Education at its toll-free number (800) 638-2041 or (301) 796-7100 or at its Internet address

http://www.fda.gov/MedicalDevices/ResourcesforYou/Industry/default.htm.

Sincerely yours,

Lori A. Wiggins

for Mark N. Melkerson Director Division of Orthopedic Devices Office of Device Evaluation Center for Devices and Radiological Health

Enclosure

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

Form Approved: QMB No. 0910-0120

	Food and Drug Administration		Expiration Date: January 31, 2017
Indications for Use			See PRA Statement below.
510(k) Number (if known)	K141677		
Device Name VariAx Elbow Plating System	n		
The distal humerus plates • intra-articular or extraart • osteotomies • nonunions The olecranon plates are in	g System is intended for fracture fixa are indicated for: icular fractures of the distal humerus		
Type of Use (Select one or b	oth, as applicable)		
☐ Prescription	in Use (Part 21 CFR 801 Subpart D)	Over-The-Coun	ter Use (21 CFR 801 Subpart C)
PLEASE DO N	OT WRITE BELOW THIS LINE - C	ONTINUE ON A SEP	ARATE PAGE IF NEEDED.
	FOR FDA U	SE ONLY	
Concurrence of Center for De	evices and Radiological Health (CDRH) (	(Signature)	
Elizabeth	FlorErank -S		
Division of C	Orthopedic Devices		

This section applies only to requirements of the Paperwork Reduction Act of 1995.

# \*DO NOT SEND YOUR COMPLETED FORM TO THE PRA STAFF EMAIL ADDRESS BELOW.\*

The burden time for this collection of information is estimated to average 79 hours per response, including the time to review instructions, search existing data sources, gather and maintain the data needed and complete and review the collection of information. Send comments regarding this burden estimate or any other aspect of this information collection, including suggestions for reducing this burden, to:

> Department of Health and Human Services Food and Drug Administration Office of Chief Information Officer Paperwork Reduction Act (PRA) Staff PRAStaff@fda.hhs.gov

"An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB number."

Page 1 of 1 PSC Publishing Strings (201) 113-6710 FORM FDA 3881 (1/14)